

34 Maple Street
Milford, Massachusetts 01757

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that: Our residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed at 201) below or an original, first and joint inventor (if plural names are listed at 201 and 202 below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HYDRAULIC AMPLIFIER PUMP FOR USE IN ULTRAHIGH PRESSURE LIQUID CHROMATOGRAPH

which is described and claimed in: 10/026,089

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign/PCT Applications and Any Priority Claims Under 35 U.S.C. 119:			
Application No.	Filing Date	Country	Priority Claimed Under 35 U.S.C. 119?

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
(35 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Applicant	Provisional Application Number	Filing Date

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) with full powers of association, substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Brian Michaelis (Reg. No. 34,221)

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2 0 1	FULL NAME OF INVENTOR	LAST NAME	MIDDLE NAME
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POST OFFICE ADDRESS	POST OFFICE ADDRESS	STATE OR COUNTRY AND ZIP CODE	
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I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 201

Date: 3/5/02, 2002

2 0 2	FULL NAME OF INVENTOR	LAST NAME	
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	Lexington	Massachusetts 01775	

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 202

Date: 3/5/02, 2002